

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

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Wednesday, July 02, 2014 3:35:15 PM

Page 3

Accept

Setup Start *NS1*

Stop *NS2*

Start Date: 7/02/14 **Start Qty:** 10.00

10

Cust Item ID:

Required Date: 7/02/14 **Req'd Qty:** 10.00

10

Customer:

Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/
Work Center ID

Operation Description

Set Up/ Run Hours

Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
---------	--------	-----------	------------	------------	---------------	-------------

140

QC21- Final Inspection - Work Order Release

0.00

140

OC

Memo

0.00

Quality Control

MLJ 14-07-11

14-7-1

DQA: _____ Date: _____



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Picklist Print

Wednesday, July 02, 2014 3:35:14 PM

Work Order ID: 121807

121807

Parent Item: D5113-1

D5113-1

Parent Item Name: Bushing

Start Date: 7/02/14

Required Date: 7/02/14

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A NEW ISSUE 14-06-23 VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M303R0.625		Purchased		No			f	80.7275		0.336842			

M303R0 625

303 Round Bar 0.625"

Location

Loc Qty

Loc Code

MAT028

80.7275

119009

47.3275

✶ 124081

33.4

337.1

DAS
44
9-89

14/07/10

DQA: _____ Date: _____



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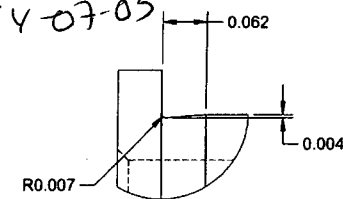
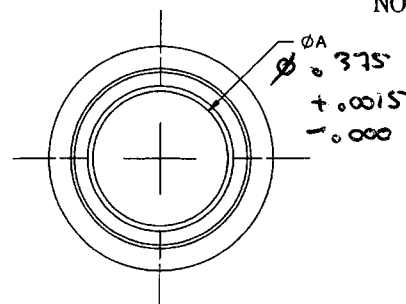
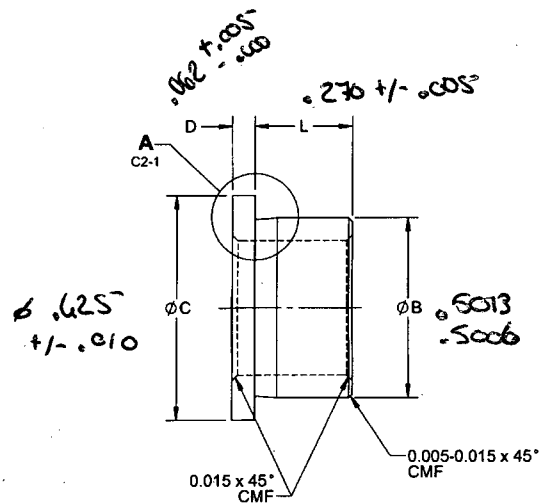
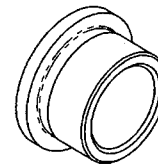
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SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT

WITHOUT NOTICE
WORK ORDER

NO. 121807 MJS

14-07-03



DETAIL A C7-1

D5113-X BUSHING

P/N	DESCRIPTION	(A)	(B)	(C)	(D)	(L)	WEIGHT (lbs)
D5113-1	BUSHING	$\phi \begin{smallmatrix} +0.0015 \\ -0.0000 \end{smallmatrix}$	$\phi \begin{smallmatrix} +0.0000 \\ -0.0007 \end{smallmatrix}$	$\phi \begin{smallmatrix} +0.010 \\ -0.010 \end{smallmatrix}$	$\phi \begin{smallmatrix} +0.005 \\ -0.000 \end{smallmatrix}$	$\begin{smallmatrix} +0.005 \\ -0.005 \end{smallmatrix}$	0.01

RELEASED
2014-06-16
M

NOTES:

- 1) MATERIAL: AISI 303/304/316 SS ROUND BAR
PER ASTM A582 OR ASTM A276
REF DART SPEC M303R OR M304R
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE TABLE

APPROVED	DESIGN	RF	DART AEROSPACE LTD	
	DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
	CHECKED	VS	DRAWING NO.	REV. A
	MFG. APPR.	JFS	D5113	SHEET 1 OF 1
	APPROVED	HS	TITLE	SCALE
DE APPR.	DS	BUSHING	NTS	
DATE	14.04.08		COPYRIGHT © 2014 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	